## **MEMORANDUM**

To: Members of the Senate Finance, Ways and Means Committee;

House Finance, Ways and Means Committee;

Senate General Welfare, Health and Human Resources Committee; and

House Health and Human Resources Committee

From: Zane Seals, Chief Financial Officer

Date: February 28<sup>th</sup>, 2022

RE: TennCare Quarterly Report on Public Chapter 642, the Annual Coverage

Assessment Act of 2021

Tennessee Code Annotated 71-5-2005(g) requires the Bureau of TennCare to submit a quarterly report on the status and use of the Annual Coverage Assessment as follows:

(1) The status if applicable of the determination and approval by CMS set forth in TCA 71-5-2003(b) of the annual coverage assessment.

The Center for Medicare and Medicaid Services approval for the Annual Coverage Assessment was received on June 30, 2010.

(2) The balance of funds in the maintenance of coverage trust fund.

The estimated balance of the trust fund at July 1, 2021 was \$180,491,196.28.

(3) The extent of which the maintenance of coverage trust fund has been used to carry out this part.

The second quarter's payments sent to hospitals totaled \$153,875,000. The ECF invoices mailed during the quarter totaled \$149,852,590. The ECF invoices paid by the hospitals during this quarter totaled \$149,852,590.

| Item   | Annual Cost<br>of<br>Reduction<br>Item | ECF<br>Required |
|--|--|-----------------|
| Fund Virtual DSH Payments  | \$222,869,700                          | \$75,118,200    |
| Fund Charity Care Pool   | \$142,845,900                          | \$48,146,200    |
| Fund Payments to Graduate Medical Education Institutions                 | \$50,000,000                           | \$16,852,500    |
| Fund TN Center for Health Workforce Development Contract                 | \$1,500,000                            | \$750,000       |
| Fund Medicare Part A Payments at Current Levels                          | \$35,550,400                           | \$11,982,300    |
| Postpone Provider Reimbursement Reductions                               | \$227,556,500                          | \$76,697,900    |
| Postpone Hospital Reimbursement Ceiling                                  | \$48,670,700                           | \$16,404,500    |
| Postpone 8 Inpatient Day Limit   | \$138,986,800                          | \$46,845,500    |
| Postpone Lab/X-ray benefit Limit   | \$41,397,100                           | \$13,952,900    |
| Postpone Office Visit benefit limit                                      | \$64,017,000                           | \$21,576,900    |
| Postpone Outpatient benefit limit  | \$153,063,600                          | \$51,590,100    |
| Postpone PT/OT/ST benefit limit  | \$28,188,000                           | \$9,500,800     |
| Fund Contract Payments for Admission, Discharge and Transfer Feeds       | \$550,000                              | \$275,000       |
| Postpone Reduction for Non-Emergent Care at Hospitals                    | \$1,678,800                            | \$565,800       |
| Offset Elimination of 340B Pricing Provision of MCO Contractor Agreement | \$6,000,000                            | \$2,022,300     |

During the second quarter of State Fiscal Year 2022, \$42,223,300\$ of the trust fund was used to fund the hospital directed payment totaling \$153,875,000. The increase in the federal matching rate during the COVID-19 emergency has made the trust fund portion of the directed payment equivalent to 27.44% instead of the non-emergency 33.64% rate.